

L06000035385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2008 JUN 26 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



ALL FLORIDA FIRM INC

813 Deltona Blvd, Ste A
Deltona, FL 32725
Phone 386-575-1180

6/11/2008

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: L05000035385

Please find a check and change of registered agent forms for the following corporations and/or LLC's.

5 STAR HOME REPAIR & IMPROVEMENT, LLC.

153 LAS BRISAS DRIVE

EASTPOINT, FL 32328

Sincerely,

All Florida Firm, Inc.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2008

ALL FLORIDA FIRM, INC.
813 DELTONA BLVD., STE. A
DELTONA, FL 32725

SUBJECT: 5 STAR HOME REPAIR & IMPROVEMENT, LLC
Ref. Number: L05000035385

We have received your document for 5 STAR HOME REPAIR & IMPROVEMENT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 908A00037171

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: **5 STAR HOME REPAIR & IMPROVEMENT, LLC**

2. The mailing address of the limited liability company is: **153 LAS BRISAS DRIVE EASTPOINT FL 32328**

4/11/2005

L05000035385

3. Date of filing/registration in Florida

4. Document Number


5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

**SAM LIPSCOMB
153 LAS BRISAS DRIVE
EASTPOINT FL 32328**

6. The name and address of the new registered agent and/or office:

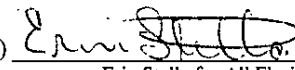
**ALL FLORIDA FIRM INC
813 DELTONA BLVD STE A (Box 1264425)
DELTONA, FL 32725**

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


(Signature of a member or authorized representative of a member)

SAM LIPSCOMB
(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent) 
Erin Stella for All Florida Firm Inc, Registered Agent

May 29, 2008
(Date)

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00**

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2008 JUN 26 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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